POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	الها الها		1,20,01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	MM	920	12.07.01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ Rejected	N Non-elected
= Allowed	I Interference
— (Through numeral) Canceled	A Appeal
÷ Restricted	O Objected

+				_
Claim Date	Claim	Date	Claim Date	
Final Organia	Final Original		Final	
	51		101	Т
2/11	52		102	
3	53		103	
1-1411111111111111111111111111111111111	54		104	
5	55		105	
	56		106	
7	57		107	
	58		108	
	59		109	
10	60		110	
11 00 0	61		111	
12 N N	62		112	
	63		113	
14	64		114	
15	65		115	_
16	66		116	_
17	67		117	
18	68		118	
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20 →	70			_
	71		121	
22	72		122	
23	73		123	
24	74			
26	75		125	_
26	76	<del>                                     </del>	126	
27 NN	77		127	_
28 N N	78	<del>                                      </del>	129	
29	80	<del>                                     </del>	130	
30	81	<del>                                     </del>	131	
31 32	82	<del></del>	132	_
33	83		133	
34	84	<del>                                     </del>	134	
35	85		135	
36	86		136	
37	87		137	
38	88		138	
39	89		139	
40	90		140	
41	91		141	
42	92		142	_
43	93		143	
44	94		144	_
45	95		145	
46	96		146	_
47	97		147	
48	98		148	_
49	99		149	
50	100		150	_
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If more than 150 claims or 10 actions staple additional sheet here

(3) 2/2/2

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